



Please Direct All Correspondence to Customer Number **20995**

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Leon M. Silverstone
 App. No : 10/624,816
 Filed : July 22, 2003
 For : METHOD AND APPARATUS FOR
 TREATMENT OF VIRAL DISEASES
 Examiner : D. D. Greene
 Art Unit : 3762

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

October 26, 2005

(Date)

Eric M. Nelson, Reg. No. 43,829

Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment and Response to Office Action in 8 pages.
- (X) Terminal Disclaimer.

The fee has been calculated as shown below:

The present application qualifies for Small Entity Status under 37 CFR 1.27.

| FEE CALCULATION | | | | |
|---------------------|-------------|--------------|----------------------|--------------|
| FEE TYPE | | FEE CODE | CALCULATION | TOTAL |
| Excess Claims | 19 - 28 = 0 | 2202 (\$25) | 0 x 25 = | \$0 |
| Excess Independent | 6 - 9 = 0 | 2201 (\$100) | 0 x 100 = | \$0 |
| Multiple Claim | 1.16(j) | 2203 (\$180) | | \$0 |
| Terminal Disclaimer | | | | \$65 |
| 3 Month Extension | 1.17(a)(3) | 2253 (\$510) | | \$510 |
| | | | TOTAL FEE DUE | \$575 |

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

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- (X) A check in the amount of \$575 is enclosed.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Eric M. Nelson
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Attorney of Record
Customer No. 20,995
(619) 235-8550